\* The beneficiary total premium for Medicare Advantage, Cost Plans and Demonstrations covers Medicare medical and hospital benefits, and prescription drug benefits and supplemental benefits, where offered. The beneficiary drug premium is the portion of the total premium that covers prescription drugs only; plan premiums vary for these benefits. Beneficiaries generally are also responsible for the Part B premium.

Dashes (-) indicate Medicare Advantage only plans (no Part D drug coverage).

		Description									Cost				Cov	erage		Convenience
			М		Type of Advantage	Plan					D	rug Deduct	tible		Coverage	Additional Offered in verage Gap		
County	Organization Name Blue Cross & Blue Shield-	Pian Name	НМО	Local PPO	Regional PPO	Private Fee-for- Service		Demo Plan	Beneficiary Total Premium* (Including Drug Premium)	Beneficiary Drug Premium*	Zero	Reduced	Standard (\$250)	Includes Tiered Copay- ments for Drugs	Generics Only	Generics and Brands	Number of Top 100 Drugs on Formulary	Mail Order Offered
BARNSTABLE	Massachusetts	Medicare HMO Blue							\$83.00	-								
		Medicare HMO Blue							\$110.00	\$27.07				•			88	•
		Medicare HMO Blue							\$125.00	\$41.84							88	•
	Blue Cross And Blue Shield Of Massachusetts, Inc.	Medicare PPO Blue							\$101.00	-								
		Medicare PPO Blue							\$128.00	\$27.08				•			88	•
		Medicare PPO Blue							\$143.00	\$41.84							88	•
	Tufts Health Plan	Medicare Preferred HMO Value	•						\$32.00	-								
		Medicare Preferred HMO Prime	•						\$50.00									
		Medicare Preferred HMO Value Rx	•						\$52.00	\$19.55	•			•			96	•
		Medicare Preferred HMO Value Rx Plus	•						\$67.00	\$35.37	•			•	•		96	•
		Medicare Preferred HMO Prime Rx Medicare Preferred HMO Prime Rx Plus	· ·		-		-		\$70.00 \$85.00	\$19.55 \$35.37	-:-			•			96 96	•
		Medicare Preferred PPO	<b>⊢</b> •		-				\$91.00	-	<u> </u>	-		•	<u> </u>	-	96	•
	+	Medicare Preferred PPO Rx			1				\$111.00	\$19.55	•						96	•
		Medicare Preferred PPO Rx Plus		•					\$126.00	\$35.37	•				•		96	•
BRISTOL	Blue Cross & Blue Shield- Massachusetts	Medicare HMO Blue							\$83.00	-								
		Medicare HMO Blue							\$110.00	\$27.07							88	•
		Medicare HMO Blue							\$125.00	\$41.84				•			88	•
	Blue Cross And Blue Shield Of																	
	Massachusetts, Inc.	Medicare PPO Blue		•					\$101.00	-								
		Medicare PPO Blue		•					\$128.00	\$27.08	•			•			88	•
		Medicare PPO Blue		•					\$143.00	\$41.84				•			88	•
	Senior Whole Health	Senior Whole Health						•	\$17.33	\$17.33			•				80	•
	Tufts Health Plan	Medicare Preferred HMO Value	•		ļ	<b> </b>			\$58.00	-	<b> </b>	1			<b> </b>	<b> </b>		
		Medicare Preferred HMO Value Rx	•	1	1				\$78.00	\$19.55	•			•	<u> </u>	<u> </u>	96	•
		Medicare Preferred PPO Medicare Preferred HMO Value Rx Plus	<del>   </del>	•	1	<del>                                     </del>		1	\$91.00 \$93.00	- \$35.37	<del>  </del>	<del>                                     </del>			<del>   </del>	<del>                                     </del>	96	
		Medicare Preferred HMO Prime	•	1	+	1			\$93.00	\$35.37	•	1		<del></del>	•	1	90	•
		Medicare Preferred PPO Rx	⊢•	•	<del>                                     </del>	<del>                                     </del>			\$111.00	\$19.55	•	<b>†</b>		•	<del>                                     </del>	<del>                                     </del>	96	•
	1	Medicare Preferred HMO Prime Rx		t	1	1	1		\$116.00	\$19.55	· ·	1	1	<u> </u>	1	1	96	
		Medicare Preferred PPO Rx Plus		•	1	<b>†</b>			\$126.00	\$35.37	•	<u> </u>		•	•	<b>†</b>	96	•
		Medicare Preferred HMO Prime Rx Plus	•						\$131.00	\$35.37	•	<u> </u>		•	•		96	•
	United Health Group	Evercare Mass SCO						•	\$14.16	\$14.16	•			•			97	•
	United Healthcare Insurance Company								\$28.42	\$28.42							97	•
DUKES	SecureHorizons Direct	SecureHorizons Direct Plan 4				•			\$25.00	-								

\* The beneficiary total premium for Medicare Advantage, Cost Plans and Demonstrations covers Medicare medical and hospital benefits, and prescription drug benefits and supplemental benefits, where offered. The beneficiary drug premium is the portion of the total premium that covers prescription drugs only; plan premiums vary for these benefits. Beneficiaries generally are also responsible for the Part B premium.

Dashes (-) indicate Medicare Advantage only plans (no Part D drug coverage).

	contracts/plans approved as	Description					J	,	<u> </u>	Cost		,			erage		Convenience
			M		ype of Advantage	Plan				D	rug Deduct	ible		Coverage	Additional Offered in erage Gap		
County	Organization Name	Plan Name	нмо			Private Fee-for- Service		Beneficiary Total Premium* (Including Drug Premium)	Beneficiary Drug Premium*	Zero	Reduced	Standard (\$250)	Includes Tiered Copay- ments for Drugs	Generics Only	Generics and Brands	Number of Top 100 Drugs on Formulary	Mail Order Offered
	Blue Cross & Blue Shield-				Ĭ .												
ESSEX	Massachusetts	Medicare HMO Blue	•					\$92.00	-								
		Medicare HMO Blue						\$120.00	\$27.30	•						88	
		Medicare HMO Blue						\$134.00	\$41.75							88	
	Blue Cross And Blue Shield Of	Wedicare HWO Blue	<u> </u>					ψ134.00	Ψ41.73	•			•	•		00	
	Massachusetts, Inc.	Medicare PPO Blue						\$111.00	_								
		Medicare PPO Blue						\$138.00	\$27.31				•			88	•
		Medicare PPO Blue						\$153.00	\$41.75	•				•		88	•
	Commonwealth Care Alliance	Commonwealth Care Connection	•					\$15.12	\$15.12			•				79	•
	Commonwealth Care Alliance, Inc.	Senior Care Options Program					•	\$29.52	\$29.52			•				79	•
	Harvard Pilgrim Health Care	First Seniority	•					\$22.18	\$22.18	•			•			100	•
		First Seniority MA Only	•					\$96.00	-							400	
	Senior Whole Health	First Seniority Senior Whole Health	•					\$121.00 \$17.33	\$22.18 \$17.33			•	•			100	•
	Tufts Health Plan	Medicare Preferred HMO Value		1	<u> </u>		•	\$17.33 \$78.00	\$17.33			•				80	•
	Tuits Health Flair	Medicare Preferred HMO Prime	÷					\$96.00	-								
		Medicare Preferred HMO Value Rx	•					\$98.00	\$19.55							96	•
		Medicare Preferred PPO		•				\$101.00	-								
		Medicare Preferred HMO Value Rx Plus						\$113.00	\$35.37				•			96	•
		Medicare Preferred HMO Prime Rx	•		Ì			\$116.00	\$19.55	•			•			96	•
		Medicare Preferred PPO Rx		•				\$121.00	\$19.55	•			•			96	•
		Medicare Preferred HMO Prime Rx Plus	•					\$131.00	\$35.37	•			•	•		96	•
		Medicare Preferred PPO Rx Plus		٠				\$136.00	\$35.37	•			•	•		96	•
	United Health Group	Evercare Mass SCO					•	\$14.16	\$14.16	•			•			97	•
	United Healthcare Insurance Company	Evercare Plan IP						\$28.42	\$28.42	•						97	
		Evercare Plan DP						\$30.27	\$30.27	•			•			97	•
		Erickson Advantage No Rx						\$90.00	-								
		Erickson Advantage						\$132.00	\$41.66	•			•			97	•

\* The beneficiary total premium for Medicare Advantage, Cost Plans and Demonstrations covers Medicare medical and hospital benefits, and prescription drug benefits and supplemental benefits, where offered. The beneficiary drug premium is the portion of the total premium that covers prescription drugs only; plan premiums vary for these benefits. Beneficiaries generally are also responsible for the Part B premium.

Dashes (-) indicate Medicare Advantage only plans (no Part D drug coverage).

		Description					J -		1 -7 -1	Cost				Cove	erage		Convenience
			М		ype of Advantage	Plan				С	rug Deduc	ible		Coverage	Additional Offered in verage Gap		
County	Organization Name	Pian Name	нмо	Local PPO	Regional PPO	Private Fee-for- Service		Beneficiary Total Premium* (Including Drug Premium)	Beneficiary Drug Premium*	Zero	Reduced	Standard (\$250)	Includes Tiered Copay- ments for Drugs	Generics Only	Generics and Brands	Number of Top 100 Drugs on Formulary	Mail Order Offered
	Blue Cross & Blue Shield-																
FRANKLIN	Massachusetts	Medicare HMO Blue	•					\$81.00	-								
		Medicare HMO Blue	•					\$108.00	\$27.23	•			•			88	•
		Medicare HMO Blue						\$122.00	\$41.71	•						88	•
	Blue Cross And Blue Shield Of Massachusetts, Inc.	Medicare PPO Blue						\$96.00	-								
		Medicare PPO Blue						\$123.00	\$27.23	•			•			88	•
		Medicare PPO Blue						\$137.00	\$41.71							88	•
	Fallon Community Health Plan	Fallon Senior Plan Saver	•					\$0.00	-								
		Fallon Senior Plan Value	•					\$29.00	\$28.77			•	•			97	•
		Fallon Senior Plan Saver Basic Rx	•					\$30.00	\$30.00			•	•			97	•
		Fallon Senior Plan Standard	•					\$40.00	-								
		Fallon Senior Plan Saver Enhanced Rx	•					\$47.00	\$47.00	•			•			97	•
		Fallon Senior Plan Plus	•					\$70.00	-								
		Fallon Senior Plan Standard Basic Rx	•					\$71.00	\$31.24			•	•			97	•
		Fallon Senior Plan Standard Enhanced Rx						\$87.00	\$46.82							97	•
		Fallon Senior Plan Plus Basic Rx	•					\$101.00	\$30.99			•	•			97	•
		Fallon Senior Plan Plus Enhanced Rx	•					\$117.00	\$46.41	•			•			97	•
		Fallon Senior Plan Preferred		•				\$135.00	-								
		Fallon Senior Plan Preferred Basic Rx		•				\$166.00	\$30.99			•	•			97	•
		Fallon Senior Plan Preferred Enhanced Rx						\$182.00	\$46.41							97	•
	SecureHorizons Direct	SecureHorizons Direct Plan 4				•		\$25.00	-								

\* The beneficiary total premium for Medicare Advantage, Cost Plans and Demonstrations covers Medicare medical and hospital benefits, and prescription drug benefits and supplemental benefits, where offered. The beneficiary drug premium is the portion of the total premium that covers prescription drugs only; plan premiums vary for these benefits. Beneficiaries generally are also responsible for the Part B premium.

Dashes (-) indicate Medicare Advantage only plans (no Part D drug coverage).

County Organization Name Plan Name HMO PPO PPO Service  Blue Cross & Blue Shield- Massachusetts Medicare HMO Blue				Cost				Cove	erage		Convenience
County   Organization Name   Plan Name   HMO   PPO   Service				D	rug Deduct	ible		Coverage	Additional Offered in verage Gap		
HAMPDEN  Medicare HMO Blue  Medicare HMO Blue  Blue Cross And Blue Shield Of Massachusetts, Inc.  Medicare PPO Blue  Medicare PPO Blue  Commonwealth Care Alliance Fallon Senior Plan Saver Fallon Senior Plan Saver Fallon Senior Plan Saver Basic Rx Fallon Senior Plan Saver Basic Rx Fallon Senior Plan Saver Enhanced Rx Fallon Senior Plan Saver Enhanced Rx Fallon Senior Plan Standard Fallon Senior Plan Standard Basic Rx Fallon Senior Plan Plus Basic Rx Fallon Senior Plan Plus Basic Rx Fallon Senior Plan Plus Basic Rx Fallon Senior Plan Preferred Enhanced Rx Fallon Senior Plan Preferred Basic Rx Fallon Senior Plan Preferred Besic Rx Fallon Senior Plan Preferred HMO Value Rx Medicare Preferred PPO Medicare Preferred PPO Medicare Preferred PPO NA Medic		Beneficiary Total Premium* (Including Drug Premium)	Beneficiary Drug Premium*	Zero	Reduced	Standard (\$250)	Includes Tiered Copay- ments for Drugs	Generics Only	Generics and Brands	Number of Top 100 Drugs on Formulary	Mail Order Offered
Medicare HMO Blue  Medicare HMO Blue  Medicare HMO Blue  Medicare PPO Blue  Medicare PPO Blue  Medicare PPO Blue  Commonwealth Care Alliance Commonwealth Care Alliance   Commonwealth Care Connection  Commonwealth Care Alliance   Commonwealth Care Connection  Commonwealth Care Alliance   Commonwealth Care Connection  Fallon Community Health Plan Fallon Senior Gare Options Program Fallon Community Health Plan Fallon Senior Plan Saver   Pallon Senior Plan Saver   Fallon Senior Plan Saver   Fallon Senior Plan Saver   Fallon Senior Plan Standard   Fallon Senior Plan Standard   Fallon Senior Plan Standard   Fallon Senior Plan Standard   Fallon Senior Plan Standard Basic Rx   Fallon Senior Plan Standard Basic Rx   Fallon Senior Plan Plas Basic Rx   Fallon Senior Plan Preferred Rx   Fallon Senior Plan Preferred Rx   Fallon Senior Plan Preferred Basic Rx   Fallon Seni											
Medicare HMO Blue  Blue Cross And Blue Shield Of Massachusetts, Inc.  Medicare PPO Blue  Commonwealth Care Alliance Commonwealth Care Alliance, Inc.  Senior Care Options Program Fallon Community Health Plan Fallon Senior Plan Saver Fallon Senior Plan Standard Enhanced Rx Fallon Senior Plan Standard Enhanced Rx Fallon Senior Plan Plus Basic Rx Fallon Senior Plan Plus Plus Basic Rx Fallon Senior Plan Plus Plus Fallon Senior Plan Preferred Plus Fallon Senior Plan Preferred Prefe		\$81.00	-								
Blue Cross And Blue Shield Of Massachusetts, Inc.  Medicare PPO Blue  Medicare PPO Blue  Commonwealth Care Alliance Commonwealth Care Connection Commonwealth Care Alliance, Inc. Fallon Community Health Plan Fallon Senior Plan Saver Basic Rx Fallon Senior Plan Plus Fallon Senior Plan Plus Fallon Senior Plan Plus Basic Rx Fallon Senior Plan Plus Enhanced Rx Fallon Senior Plan Preferred Fallon Senior Plan Preferred Basic Rx Fallon Senior Plan Preferred Hanced Rx Fallon Senior Plan Preferred Hanced Rx Fallon Senior Plan Preferred Basic Rx Fallon Senior Plan Preferred Hanced Rx Fallon Senior Plan Preferred Plan Plan Plan Plan Plan Plan Plan Plan		\$108.00	\$27.23				•			88	•
Blue Cross And Blue Shield Of Massachusetts, Inc.  Medicare PPO Blue  Medicare PPO Blue  Commonwealth Care Alliance Commonwealth Care Connection Commonwealth Care Alliance, Inc. Fallon Community Health Plan Fallon Senior Plan Saver Basic Rx Fallon Senior Plan Plus Fallon Senior Plan Plus Fallon Senior Plan Plus Basic Rx Fallon Senior Plan Plus Enhanced Rx Fallon Senior Plan Preferred Fallon Senior Plan Preferred Basic Rx Fallon Senior Plan Preferred Hanced Rx Fallon Senior Plan Preferred Hanced Rx Fallon Senior Plan Preferred Basic Rx Fallon Senior Plan Preferred Hanced Rx Fallon Senior Plan Preferred Plan Plan Plan Plan Plan Plan Plan Plan											
Medicare PPO Blue  Medicare PPO Blue  Medicare PPO Blue  Commonwealth Care Alliance Commonwealth Care Connection Commonwealth Care Alliance, Inc. Earlion Community Health Plan Fallon Senior Plan Saver Fallon Senior Plan Saver Fallon Senior Plan Saver Enhanced Rx Fallon Senior Plan Standard Fallon Senior Plan Plus Fallon Senior Plan Plus Fallon Senior Plan Plus Basic Rx Fallon Senior Plan Plus Plus Enhanced Rx Fallon Senior Plan Preferred Plan Preferred Fallon Senior Plan Preferred HMO Value Rx Fallon Senior Plan Preferred HMO Value Rx Medicare Preferred HMO Value Rx Medicare Preferred HMO Value Rx Medicare Preferred HMO Value Rx Plus Medicare Preferred HMO Prime Medicare Preferred HMO Prime Rx Plus		\$122.00	\$41.71	•			•	•		88	•
Medicare PPO Blue  Commonwealth Care Alliance Commonwealth Care Connection  Commonwealth Care Alliance, Inc. Senior Care Options Program Fallon Community Health Plan Fallon Senior Plan Saver Fallon Senior Plan Saver Fallon Senior Plan Saver Fallon Senior Plan Saver Basic Rx Fallon Senior Plan Standard Fallon Senior Plan Standard Fallon Senior Plan Plus Enhanced Rx Fallon Senior Plan Plus Fallon Senior Plan Standard Basic Rx Fallon Senior Plan Plus Basic Rx Fallon Senior Plan Plus Basic Rx Fallon Senior Plan Plus Enhanced Rx Fallon Senior Plan Preferred Fallon Senior Plan Preferred Fallon Senior Plan Preferred Hus Fallon Senior Plan Preferred Plus Enhanced Rx Fallon Senior Plan Preferred Hus Value Rx Medicare Preferred HMO Prime Rx Medicare Preferred PPO Rx											
Medicare PPO Blue   Commonwealth Care Alliance   Commonwealth Care Connection   Commonwealth Care Alliance, Inc.   Senior Care Options Program   Fallon Community Health Plan   Fallon Senior Plan Saver   Fallon Senior Plan Value   Fallon Senior Plan Value   Fallon Senior Plan Saver Basic Rx   Fallon Senior Plan Saver Basic Rx   Fallon Senior Plan Standard   Fallon Senior Plan Standard Basic Rx   Fallon Senior Plan Standard Enhanced Rx   Fallon Senior Plan Standard Enhanced Rx   Fallon Senior Plan Standard Enhanced Rx   Fallon Senior Plan Plus Basic Rx   Fallon Senior Plan Plus Basic Rx   Fallon Senior Plan Plus Enhanced Rx   Fallon Senior Plan Preferred   Fallon Senior Plan Preferred Plan Preferred Plan Preferred Plan Preferred Plan Prefe		\$96.00	-								
Medicare PPO Blue   Commonwealth Care Alliance   Commonwealth Care Connection   Commonwealth Care Alliance, Inc.   Senior Care Options Program   Fallon Community Health Plan   Fallon Senior Plan Saver   Fallon Senior Plan Value   Fallon Senior Plan Value   Fallon Senior Plan Saver Basic Rx   Fallon Senior Plan Saver Basic Rx   Fallon Senior Plan Standard   Fallon Senior Plan Standard Basic Rx   Fallon Senior Plan Standard Enhanced Rx   Fallon Senior Plan Standard Enhanced Rx   Fallon Senior Plan Standard Enhanced Rx   Fallon Senior Plan Plus Basic Rx   Fallon Senior Plan Plus Basic Rx   Fallon Senior Plan Plus Enhanced Rx   Fallon Senior Plan Preferred   Fallon Senior Plan Preferred Plan Preferred Plan Preferred Plan Preferred Plan Prefe			_								
Commonwealth Care Alliance   Commonwealth Care Connection   Commonwealth Care Alliance, Inc.   Senior Care Options Program   Fallon Community Health Plan   Fallon Senior Plan Saver   •		\$123.00	\$27.23	•			•			88	•
Commonwealth Care Alliance   Commonwealth Care Connection   Commonwealth Care Alliance, Inc.   Senior Care Options Program   Senior Care Options Program   Fallon Community Health Plan   Fallon Senior Plan Saver   •     Fallon Care Options Program   Fallon Community Health Plan   Fallon Senior Plan Saver   •		****	0								
Commonwealth Care Alliance, Inc. Fallon Community Health Plan Fallon Senior Plan Saver Fallon Senior Plan Value Fallon Senior Plan Value Fallon Senior Plan Saver Basic Rx Fallon Senior Plan Standard Fallon Senior Plan Standard Fallon Senior Plan Saver Enhanced Rx Fallon Senior Plan Standard Basic Rx Fallon Senior Plan Standard Basic Rx Fallon Senior Plan Standard Enhanced Rx Fallon Senior Plan Plus Basic Rx Fallon Senior Plan Plus Enhanced Rx Fallon Senior Plan Preferred Fallon Senior Plan Preferred Fallon Senior Plan Preferred Basic Rx Fallon Senior Plan Preferred HMD Value Medicare Preferred HMO Value Medicare Preferred HMO Value Rx Medicare Preferred HMO Prime Medicare Preferred HMO Prime Medicare Preferred HMO Prime Rx		\$137.00	\$41.71	•			•	•		88	•
Fallon Community Health Plan Fallon Senior Plan Saver Fallon Senior Plan Saver Basic Rx Fallon Senior Plan Standard Fallon Senior Plan Standard Fallon Senior Plan Saver Enhanced Rx Fallon Senior Plan Plus Enhanced Rx Fallon Senior Plan Plus Enhanced Rx Fallon Senior Plan Standard Enhanced Rx Fallon Senior Plan Standard Enhanced Rx Fallon Senior Plan Standard Enhanced Rx Fallon Senior Plan Plus Basic Rx Fallon Senior Plan Plus Basic Rx Fallon Senior Plan Plus Enhanced Rx Fallon Senior Plan Preferred Fallon Senior Plan Preferred Fallon Senior Plan Preferred Enhanced Rx Fallon Senior Plan Preferred Hx Fallon Senior Plan Preferred Planced Rx Fallon Senior Plan Preferred Hx Fallon Senior Plan Preferred Hx Fallon Senior Plan Preferred Phanced Rx Fallon Senior Plan Preferred Hx Fallon Senior Plan Preferred Hx Fallon Senior Plan Preferred Phanced Rx Fallon Senior Plan Preferred Hx Fallon Senior Plan Preferred Hx Fallon Senior Plan Preferred Phanced Rx Fallon Senior Plan Preferred Hx Fallon Senior Plan Preferred Hx Fallon Senior Plan Preferred Phanced Rx Fallon Senior Plan Preferred Hx Fallon Senior Plan Preferred Px Fallon Senior Preferred Px Fallon Senior Preferred Px Fallon Senior Preferred Px Fallon Senior Pala Px Fallon Senior Px Fallon Se		\$15.12	\$15.12			•				79	•
Fallon Senior Plan Value Fallon Senior Plan Standard Basic Rx Fallon Senior Plan Standard Basic Rx Fallon Senior Plan Standard Basic Rx Fallon Senior Plan Standard Enhanced Rx Fallon Senior Plan Plus Basic Rx Fallon Senior Plan Plus Basic Rx Fallon Senior Plan Plus Basic Rx Fallon Senior Plan Plus Enhanced Rx Fallon Senior Plan Preferred Plus Enhanced Rx Fallon Senior Plan Preferred Basic Rx Fallon Senior Plan Preferred HMD Value Rx Fallon Senior Plan Preferred HMO Value Rx Medicare Preferred PPO Nx Medicare Preferred PPO Rx Medicare Preferred PPO Rx Medicare Preferred PPO Rx Medicare Preferred PPO Rx Neus Medicare Preferred PPO Rx Neus Medicare Preferred PPO Rx Plus	•	\$29.52	\$29.52			•				79	•
Fallon Senior Plan Saver Basic Rx		\$0.00	-							07	
Fallon Senior Plan Standard   Fallon Senior Plan Standard   Fallon Senior Plan Plus   Fallon Senior Plan Plus   Fallon Senior Plan Plus   Fallon Senior Plan Standard Basic Rx   Fallon Senior Plan Standard Enhanced Rx   Fallon Senior Plan Plus Basic Rx   Fallon Senior Plan Plus Basic Rx   Fallon Senior Plan Plus Basic Rx   Fallon Senior Plan Plus Enhanced Rx   Fallon Senior Plan Preferred   Fallon Senior Plan Preferred   Fallon Senior Plan Preferred   Fallon Senior Plan Preferred Basic Rx   Fallon Senior Plan Preferred Basic Rx   Fallon Senior Plan Preferred Hasic Rx   Fallon Senior Plan Preferred Hasic Rx   Fallon Senior Plan Preferred Hasic Rx   Fallon Senior Plan Preferred Hiside Preferred Profunce   Medicare Preferred Profunce   Medicare Preferred Hiside Profunce   Medicare Preferred Hiside Preferred Profunce   Medicare Preferred Hiside Preferred Profunce   Medicare Preferred Hiside Preferred Hiside Preferred Profunce   Medicare Preferred Hiside Preferred Profunce   Medicare Preferred Profunce   Med		\$29.00	\$28.77			•	•			97	•
Fallon Senior Plan Saver Enhanced Rx Fallon Senior Plan Plus Fallon Senior Plan Standard Basic Rx Fallon Senior Plan Standard Enhanced Rx Fallon Senior Plan Standard Enhanced Rx Fallon Senior Plan Plus Basic Rx Fallon Senior Plan Plus Basic Rx Fallon Senior Plan Plus Enhanced Rx Fallon Senior Plan Preferred Fallon Senior Plan Preferred Plander Rx Fallon Senior Plan Preferred Enhanced Rx Fallon Senior Plan Preferred HMO Value Rx Fallon Senior Plan Preferred HMO Value Rx Medicare Preferred PNO Medicare Preferred PPO Medicare Preferred PPO Medicare Preferred PPO Medicare Preferred PPO Rx Medicare Preferred HMO Prime Rx Plus Medicare Preferred PPO Rx Medicare Preferred PPO Rx Plus  Valued Health Group  Evercare Mass SCO		\$30.00	\$30.00			•	•			97	•
Fallon Senior Plan Plus Fallon Senior Plan Standard Basic Rx Fallon Senior Plan Standard Enhanced Rx Fallon Senior Plan Plus Basic Rx Fallon Senior Plan Plus Basic Rx Fallon Senior Plan Plus Basic Rx Fallon Senior Plan Plus Enhanced Rx Fallon Senior Plan Preferred Fallon Senior Plan Preferred Fallon Senior Plan Preferred Basic Rx Fallon Senior Plan Preferred Enhanced Rx Fallon Senior Plan Preferred HMO Value Medicare Preferred HMO Value Medicare Preferred HMO Value Rx Medicare Preferred HMO Value Rx Medicare Preferred HMO Value Rx Medicare Preferred PMO Prime Medicare Preferred PPO Medicare Preferred PPO Medicare Preferred PPO Medicare Preferred PPO Rx Medicare Preferred HMO Prime Rx Medicare Preferred HMO Prime Rx Medicare Preferred PPO Rx Medicare Preferred HMO Prime Rx Medicare Preferred PPO Rx Medicare Preferred PPO Rx Medicare Preferred PPO Rx Nedicare Preferred PPO Rx Plus Medicare Preferred PPO Rx Plus		\$40.00	-							07	
Fallon Senior Plan Standard Basic Rx  Fallon Senior Plan Standard Enhanced Rx Fallon Senior Plan Plus Basic Rx Fallon Senior Plan Plus Basic Rx Fallon Senior Plan Plus Enhanced Rx Fallon Senior Plan Preferred Fallon Senior Plan Preferred  Fallon Senior Plan Preferred Basic Rx  Fallon Senior Plan Preferred Basic Rx  Fallon Senior Plan Preferred Basic Rx  Fallon Senior Plan Preferred Enhanced Rx  Medicare Preferred HMO Value Rx Plus  Medicare Preferred PMO Prime Medicare Preferred PPO Medicare Preferred PPO Medicare Preferred HMO Prime Rx Medicare Preferred PPO Rx Medicare Preferred HMO Prime Rx Medicare Preferred PPO Rx Medicare Preferred PPO Rx Medicare Preferred PPO Rx Neus Medicare Preferred PPO Rx Plus  Evercare Mass SCO		\$47.00	\$47.00	•			•			97	•
Fallon Senior Plan Standard Enhanced Rx Fallon Senior Plan Plus Basic Rx Fallon Senior Plan Plus Enhanced Rx Fallon Senior Plan Plus Enhanced Rx Fallon Senior Plan Preferred Fallon Senior Plan Preferred Basic Rx Fallon Senior Plan Preferred Basic Rx  Fallon Senior Plan Preferred Basic Rx  Fallon Senior Plan Preferred Basic Rx  Fallon Senior Plan Preferred Enhanced Rx  Fallon Senior Plan Preferred Hanced Rx  Medicare Preferred HMO Value Medicare Preferred HMO Value Rx  Medicare Preferred PPO Medicare Preferred PPO Rx Medicare Preferred HMO Prime Rx Medicare Preferred HMO Prime Rx Plus Medicare Preferred HMO Prime Rx Plus Medicare Preferred PPO Rx Plus  United Health Group  Evercare Mass SCO		\$70.00	-							07	
Fallon Senior Plan Plus Basic Rx Fallon Senior Plan Plus Enhanced Rx Fallon Senior Plan Preferred Fallon Senior Plan Preferred Fallon Senior Plan Preferred Fallon Senior Plan Preferred Enhanced Rx Fallon Senior Plan Preferred Enhanced Rx Fallon Senior Plan Preferred HMO Value Fallon Senior Plan Preferred HMO Value Rx Fallon Senior Plan Preferred HMO Value Rx Medicare Preferred HMO Value Rx Medicare Preferred HMO Value Rx Medicare Preferred HMO Prime Medicare Preferred PMO Prime Medicare Preferred PPO Medicare Preferred PPO Medicare Preferred PPO Medicare Preferred HMO Prime Rx Netical Preferred HMO Prime Rx Medicare Preferred HMO Prime Rx Netical Preferred PPO Rx Medicare Preferred PPO Rx Netical Preferred PPO Rx Netical Preferred PPO Rx Netical Preferred PPO Rx Plus Medicare Preferred PPO Rx Plus Medicare Preferred PPO Rx Plus Medicare Preferred PPO Rx Plus Vercare Mass SCO		\$71.00	\$31.24			•	•			97	•
Fallon Senior Plan Plus Enhanced Rx Fallon Senior Plan Preferred Fallon Senior Plan Preferred Basic Rx  Fallon Senior Plan Preferred Basic Rx  Fallon Senior Plan Preferred Enhanced Rx Fallon Senior Plan Preferred Enhanced Rx  Fallon Senior Plan Preferred Enhanced Rx  Fallon Senior Plan Preferred Enhanced Rx  Medicare Preferred HMO Value Medicare Preferred HMO Value Rx Medicare Preferred HMO Value Rx Plus Medicare Preferred HMO Prime Medicare Preferred PPO Medicare Preferred PPO Medicare Preferred HMO Prime Rx Medicare Preferred PPO Rx Medicare Preferred HMO Prime Rx Plus Medicare Preferred HMO Prime Rx Plus Medicare Preferred PPO Rx Plus  United Health Group		\$87.00	\$46.82				•			97	•
Fallon Senior Plan Preferred Fallon Senior Plan Preferred Fallon Senior Plan Preferred Basic Rx  Fallon Senior Plan Preferred Enhanced Rx  Fallon Senior Plan Preferred Enhanced Rx  Tufts Health Plan Medicare Preferred HMO Value Rx Medicare Preferred HMO Value Rx  Medicare Preferred HMO Value Rx Plus Medicare Preferred HMO Prime Medicare Preferred PPO Medicare Preferred PPO Medicare Preferred PPO Rx Medicare Preferred HMO Prime Rx Medicare Preferred PPO Rx Medicare Preferred PPO Rx Medicare Preferred PPO Rx Medicare Preferred PPO Rx Plus Medicare Preferred PPO Rx Plus Medicare Preferred PPO Rx Plus  Valued Health Group  Evercare Mass SCO		\$101.00	\$30.99			•	•			97	•
Fallon Senior Plan Preferred Basic Rx  Fallon Senior Plan Preferred Enhanced Rx  Medicare Preferred HMO Value  Medicare Preferred HMO Value Rx  Medicare Preferred HMO Value Rx  Medicare Preferred HMO Value Rx Plus  Medicare Preferred HMO Prime  Medicare Preferred PPO  Medicare Preferred PPO  Medicare Preferred PPO  Medicare Preferred HMO Prime Rx  Medicare Preferred HMO Prime Rx  Medicare Preferred HMO Prime Rx  Medicare Preferred HMO Prime Rx Plus  Medicare Preferred HMO Prime Rx Plus  Medicare Preferred PPO Rx  Medicare Preferred PPO Rx Plus  United Health Group  Evercare Mass SCO		\$117.00	\$46.41	•			•			97	•
Fallon Senior Plan Preferred Enhanced Rx  Tufts Health Plan  Medicare Preferred HMO Value  Medicare Preferred HMO Value Rx  Medicare Preferred HMO Value Rx Plus  Medicare Preferred HMO Value Rx Plus  Medicare Preferred HMO Prime  Medicare Preferred PPO  Medicare Preferred PPO  Medicare Preferred HMO Prime Rx  Medicare Preferred PPO Rx  Medicare Preferred PPO Rx  Medicare Preferred HMO Prime Rx Plus  Medicare Preferred HMO Prime Rx Plus  Medicare Preferred PPO Rx Plus  Medicare Preferred PPO Rx Plus  United Health Group  Evercare Mass SCO		\$135.00	-								
Tufts Health Plan Medicare Preferred HMO Value •  Medicare Preferred HMO Value Rx •  Medicare Preferred HMO Value Rx Pius •  Medicare Preferred HMO Prime •  Medicare Preferred PMO •  Medicare Preferred PPO •  Medicare Preferred PPO x  Medicare Preferred HMO Prime Rx •  Medicare Preferred HMO Prime Rx •  Medicare Preferred HMO Prime Rx •  Medicare Preferred HMO Prime Rx Pius •  Medicare Preferred PPO Rx •  Medicare Preferred PPO Rx Pius •  United Health Group Evercare Mass SCO		\$166.00	\$30.99			•	•			97	•
Tufts Health Plan Medicare Preferred HMO Value •  Medicare Preferred HMO Value Rx •  Medicare Preferred HMO Value Rx Pius •  Medicare Preferred HMO Prime •  Medicare Preferred PMO •  Medicare Preferred PPO •  Medicare Preferred PPO x  Medicare Preferred HMO Prime Rx •  Medicare Preferred HMO Prime Rx •  Medicare Preferred HMO Prime Rx •  Medicare Preferred HMO Prime Rx Pius •  Medicare Preferred PPO Rx •  Medicare Preferred PPO Rx Pius •  United Health Group Evercare Mass SCO		\$182.00	\$46.41							97	
Medicare Preferred HMO Value Rx Plus  Medicare Preferred HMO Prime  Medicare Preferred PPO  Medicare Preferred PPO  Medicare Preferred PPO Rx  Medicare Preferred HMO Prime Rx  Medicare Preferred HMO Prime Rx Plus  Medicare Preferred PPO Rx  Medicare Preferred PPO Rx Plus  Evercare Mass SCO		\$37.00	-								
Medicare Preferred HMO Value Rx Plus  Medicare Preferred HMO Prime  Medicare Preferred PPO  Medicare Preferred PPO  Medicare Preferred PPO Rx  Medicare Preferred PPO Rx  Medicare Preferred HMO Prime Rx Plus  Medicare Preferred PPO Rx  Medicare Preferred PPO Rx Plus  Evercare Mass SCO		\$57.00	\$19.55	•			•		1	96	•
Medicare Preferred HMO Prime  Medicare Preferred PPO  Medicare Preferred PPO  Medicare Preferred HMO Prime Rx  Medicare Preferred PPO Rx  Medicare Preferred PPO Rx  Medicare Preferred PPO Rx  Medicare Preferred PPO Rx Plus  Medicare Preferred PPO Rx Plus  United Health Group  Evercare Mass SCO		\$72.00	\$35.37	•			•	•	1	96	•
Medicare Preferred PPO		\$75.00	-				İ				
Medicare Preferred HMO Prime Rx  Medicare Preferred PPO Rx  Medicare Preferred HMO Prime Rx Plus  Medicare Preferred HMO Prime Rx Plus  Medicare Preferred PPO Rx Plus  United Health Group  Medicare Preferred PPO Rx Plus  Evercare Mass SCO		\$81.00	-								
Medicare Preferred PPO Rx  Medicare Preferred HMO Prime Rx Plus  Medicare Preferred PPO Rx Plus  United Health Group  Evercare Mass SCO		\$95.00	\$19.55	•			•			96	•
Medicare Preferred PPO Rx Plus  United Health Group  Evercare Mass SCO		\$101.00	\$19.55	•			•			96	•
United Health Group Evercare Mass SCO		\$110.00	\$35.37	•			•	•		96	•
		\$116.00	\$35.37	•			•	•		96	•
Listed Hould are Insurance Comment France Plan ID	•	\$14.16	\$14.16	•			•			97	•
United Healthcare Insurance Company Evercare Plan IP		\$28.42	\$28.42			_				97	•
Evercare Plan DP •		\$30.27	\$30.27						1	97	•

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Dashes (-) indicate Medicare Advantage only plans (no Part D drug coverage).

		Description					J-1		1 -7 -1	Cost				Cove	erage		Convenience
			M		ype of Advantage	Plan				D	rug Deduct	ible		Coverage	Additional Offered in verage Gap		
County	Organization Name	Plan Name	нмо	Local PPO	Regional PPO	Private Fee-for- Service		Beneficiary Total Premium* (Including Drug Premium)	Beneficiary Drug Premium*	Zero	Reduced	Standard (\$250)	Includes Tiered Copay- ments for Drugs	Generics Only	Generics and Brands	Number of Top 100 Drugs on Formulary	Mail Order Offered
	Blue Cross & Blue Shield-																
HAMPSHIRE	Massachusetts	Medicare HMO Blue	•					\$81.00	-								
		Medicare HMO Blue						\$108.00	\$27.23	•			•			88	•
		Medicare HMO Blue						\$122.00	\$41.71							88	•
	Blue Cross And Blue Shield Of Massachusetts, Inc.	Medicare PPO Blue						\$96.00	-								
		Medicare PPO Blue						\$123.00	\$27.23	•			•			88	•
		Medicare PPO Blue						\$137.00	\$41.71	•						88	•
	Fallon Community Health Plan	Fallon Senior Plan Saver	•					\$0.00	-								
		Fallon Senior Plan Value	•					\$29.00	\$28.77			•	•			97	•
		Fallon Senior Plan Saver Basic Rx Fallon Senior Plan Standard	•					\$30.00 \$40.00	\$30.00			•	•			97	•
		Fallon Senior Plan Standard Fallon Senior Plan Saver Enhanced Rx	· :	1				\$47.00	\$47.00							97	•
		Fallon Senior Plan Plus	•					\$70.00	-	•			•			91	•
		Fallon Senior Plan Standard Basic Rx	•					\$71.00	\$31.24			•	•			97	•
		Fallon Senior Plan Standard Enhanced Rx						\$87.00	\$46.82							97	•
		Fallon Senior Plan Plus Basic Rx	•					\$101.00	\$30.99			•	•			97	•
		Fallon Senior Plan Plus Enhanced Rx	•					\$117.00	\$46.41	•			•			97	•
		Fallon Senior Plan Preferred		•				\$135.00	-								
		Fallon Senior Plan Preferred Basic Rx		•				\$166.00	\$30.99			•	•			97	•
		Fallon Senior Plan Preferred Enhanced Rx						\$182.00	\$46.41	•						97	•

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		Description									Cost				Cov	erage		Convenience
			M		ype of Advantage	Plan					D	rug Deduct	tible		Coverage	Additional Offered in verage Gap		
County	Organization Name	Plan Name	нмо	Local PPO	Regional PPO	Private Fee-for- Service		Demo Plan	Beneficiary Total Premium* (Including Drug Premium)	Beneficiary Drug Premium*	Zero	Reduced	Standard (\$250)	Includes Tiered Copay- ments for Drugs	Generics Only	Generics and Brands	Number of Top 100 Drugs on Formulary	Mail Order Offered
MIDDLESEX	Blue Cross & Blue Shield- Massachusetts	Medicare HMO Blue							\$92.00	_								
		Medicare HMO Blue							\$120.00	\$27.30							88	•
		Medicare HMO Blue							\$134.00	\$41.75							88	•
	Blue Cross And Blue Shield Of Massachusetts, Inc.	Medicare PPO Blue							\$111.00	-								
		Medicare PPO Blue							\$138.00	\$27.31				•			88	•
		Medicare PPO Blue							\$153.00	\$41.75					•		88	•
	Commonwealth Care Alliance	Commonwealth Care Connection	•						\$15.12	\$15.12			•				79	•
	Commonwealth Care Alliance, Inc.	Senior Care Options Program						•	\$29.52	\$29.52			•				79	•
	Fallon Community Health Plan	Fallon Senior Plan Saver	•						\$0.00	-								
		Fallon Senior Plan Value	•						\$29.00	\$28.77			•	•			97	•
		Fallon Senior Plan Saver Basic Rx	•						\$30.00	\$30.00			•	•			97	•
		Fallon Senior Plan Standard	•						\$40.00	-								
		Fallon Senior Plan Saver Enhanced Rx	•						\$47.00	\$47.00	•			•			97	•
		Fallon Senior Plan Plus	•						\$70.00	-								
		Fallon Senior Plan Standard Basic Rx	•						\$71.00	\$31.24			•	•			97	•
		Fallon Senior Plan Standard Enhanced Rx							\$87.00	\$46.82							97	•
		Fallon Senior Plan Plus Basic Rx	•						\$101.00	\$30.99			•	•			97	•
		Fallon Senior Plan Plus Enhanced Rx	•						\$117.00	\$46.41	•			•			97	•
		Fallon Senior Plan Preferred		•					\$135.00	-								
		Fallon Senior Plan Preferred Basic Rx		•					\$166.00	\$30.99			•	•			97	•
		Fallon Senior Plan Preferred Enhanced Rx		•					\$182.00	\$46.41	•			•			97	•
	Harvard Pilgrim Health Care	First Seniority	•						\$22.18	\$22.18	•			•			100	•
		First Seniority MA Only	•						\$96.00	-								
		First Seniority	•						\$121.00	\$22.18			•	•			100	•
	Senior Whole Health	Senior Whole Health						•	\$17.33	\$17.33			•				80	•
	Tufts Health Plan	Medicare Preferred HMO Value	•						\$49.00									
		Medicare Preferred HMO Value Rx	•			ļ	1		\$69.00	\$19.55	•	ļ		•	ļ		96	•
	1	Medicare Preferred HMO Value Rx Plus	٠		ļ	<b> </b>	<b>!</b>		\$84.00	\$35.37	•	ļ	ļ	•	•	ļ	96	•
		Medicare Preferred HMO Prime	•			<u> </u>	<u> </u>	ļ	\$87.00	-	<u> </u>	<u> </u>			<u> </u>			
		Medicare Preferred PPO		•		<u> </u>	<u> </u>	ļ	\$91.00	-	<u> </u>	<u> </u>			<u> </u>		00	
		Medicare Preferred HMO Prime Rx	•		-	1	1		\$107.00	\$19.55	•	1	l	•	1	1	96	•
-		Medicare Preferred PPO Rx	_	•	-	1	1		\$111.00	\$19.55	•	1	l	•	<b>_</b>	1	96	•
		Medicare Preferred HMO Prime Rx Plus	٠			<u> </u>	<u> </u>	ļ	\$122.00	\$35.37	•	<u> </u>		•	•		96	•
	Haited Health Cre-	Medicare Preferred PPO Rx Plus		•	-	1	1		\$126.00	\$35.37	•	1	l	•	•	1	96	•
	United Health Group	Evercare Mass SCO			-	1	1	•	\$14.16	\$14.16	•	1	l	•	1	1	97	•
	United Healthcare Insurance Company	Evercare Plan IP							\$28.42	\$28.42				•			97	•
		Evercare Plan DP							\$30.27	\$30.27				•			97	•

\* The beneficiary total premium for Medicare Advantage, Cost Plans and Demonstrations covers Medicare medical and hospital benefits, and prescription drug benefits and supplemental benefits, where offered. The beneficiary drug premium is the portion of the total premium that covers prescription drugs only; plan premiums vary for these benefits. Beneficiaries generally are also responsible for the Part B premium.

Dashes (-) indicate Medicare Advantage only plans (no Part D drug coverage).

		Description									Cost				Cov	erage		Convenience
			M		ype of Advantage	Plan					D	rug Deduct	tible		Coverage	Additional Offered in verage Gap		
County	Organization Name	Plan Name	нмо	Local PPO	Regional PPO	Private Fee-for- Service		Demo Plan	Beneficiary Total Premium* (Including Drug Premium)	Beneficiary Drug Premium*	Zero	Reduced	Standard (\$250)	Includes Tiered Copay- ments for Drugs	Generics Only	Generics and Brands	Number of Top 100 Drugs on Formulary	Mail Order Offered
NORFOLK	Blue Cross & Blue Shield- Massachusetts	Medicare HMO Blue	١.						\$92.00	_								
TOTAL OLIV	Maccachacotto	Inducate Filing Blac							ψ02.00									
		Medicare HMO Blue	•						\$120.00	\$27.30	•			•			88	•
		Medicare HMO Blue	•						\$134.00	\$41.75	•			•			88	•
	Blue Cross And Blue Shield Of Massachusetts, Inc.	Medicare PPO Blue							\$111.00	-								
		Medicare PPO Blue							\$138.00	\$27.31				•			88	•
		Medicare PPO Blue							\$153.00	\$41.75							88	
	Commonwealth Care Alliance	Commonwealth Care Connection	•	-					\$15.12	\$15.12			•	Ť			79	•
	Commonwealth Care Alliance, Inc.	Senior Care Options Program						•	\$29.52	\$29.52			•				79	•
	Fallon Community Health Plan	Fallon Senior Plan Saver	•						\$0.00	-								
		Fallon Senior Plan Value	•						\$29.00	\$28.77			•	•			97	•
		Fallon Senior Plan Saver Basic Rx	٠						\$30.00	\$30.00			•	•			97	•
		Fallon Senior Plan Standard	•						\$40.00	-								
		Fallon Senior Plan Saver Enhanced Rx	•						\$47.00	\$47.00	•			•			97	•
		Fallon Senior Plan Plus	•				1		\$70.00	-							077	
		Fallon Senior Plan Standard Basic Rx	٠						\$71.00	\$31.24			•	•			97	•
		Fallon Senior Plan Standard Enhanced Rx							\$87.00	\$46.82				•			97	•
		Fallon Senior Plan Plus Basic Rx	•				1		\$101.00	\$30.99	-		•	•			97	•
		Fallon Senior Plan Plus Enhanced Rx Fallon Senior Plan Preferred	•	•		1	1		\$117.00 \$135.00	\$46.41	•			•			97	•
		Fallon Senior Plan Preferred Basic Rx		÷		ļ	1		\$166.00	\$30.99			•	•			97	
		I alion Senior Flam Freiened Basic 10x		Ť					\$100.00	ψ50.55			<u> </u>	•			31	- ·
		Fallon Senior Plan Preferred Enhanced Rx		•					\$182.00	\$46.41	•			•			97	•
	Harvard Pilgrim Health Care	First Seniority	•						\$22.18	\$22.18	•			•			100	•
		First Seniority MA Only	•						\$96.00	-								
		First Seniority	٠						\$121.00	\$22.18			•	•			100	•
	Senior Whole Health	Senior Whole Health						•	\$17.33	\$17.33			•				80	•
-	Tufts Health Plan	Medicare Preferred HMO Value	٠			<b></b>	<b>_</b>		\$32.00	-		ļ						
		Medicare Preferred HMO Prime	•			<b></b>	1		\$50.00	- \$19.55	<u> </u>			_			06	
	+	Medicare Preferred HMO Value Rx Medicare Preferred HMO Value Rx Plus	•			<del>                                     </del>	1	-	\$52.00 \$67.00	\$19.55 \$35.37	•	<del>                                     </del>		•			96 96	•
		Medicare Preferred HMO Value RX Plus  Medicare Preferred HMO Prime Rx	<b>-</b>			<del>                                     </del>	1		\$70.00	\$19.55	<del>- :</del>	1		•	-		96	<del>- : -</del>
		Medicare Preferred HMO Prime Rx Plus	<u> </u>			<del>                                     </del>	1		\$85.00	\$35.37	-	<b> </b>		•			96	<u> </u>
		Medicare Preferred PPO		•		1			\$101.00	φοσ.στ		1		_				
		Medicare Preferred PPO Rx		•					\$121.00	\$19.55	•			•			96	•
		Medicare Preferred PPO Rx Plus		•					\$136.00	\$35.37	•			•	•		96	•
	United Health Group	Evercare Mass SCO						•	\$14.16	\$14.16	•			•			97	•
	United Healthcare Insurance Company	Evercare Plan IP							\$28.42	\$28.42				•			97	•
		Evercare Plan DP		•					\$30.27	\$30.27	•			•			97	•

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		Description								Cost				Cove	erage		Convenience
			М		ype of Advantage	Plan				D	rug Deduct	tible		Coverage	Additional Offered in erage Gap		
County	Organization Name	Plan Name	нмо		Regional PPO	Private Fee-for- Service		Beneficiary Total Premium* (Including Drug Premium)	Beneficiary Drug Premium*	Zero	Reduced	Standard (\$250)	Includes Tiered Copay- ments for Drugs	Generics Only	Generics and Brands	Number of Top 100 Drugs on Formulary	Mail Order Offered
	Blue Cross & Blue Shield-																l
PLYMOUTH	Massachusetts	Medicare HMO Blue	•					\$83.00	-								<b></b>
		Medicare HMO Blue						\$110.00	\$27.07				•			88	•
		Medicare HMO Blue						\$125.00	\$41.84	•						88	•
	Blue Cross And Blue Shield Of																
	Massachusetts, Inc.	Medicare PPO Blue		•				\$101.00	-								<b></b>
		Medicare PPO Blue		•				\$128.00	\$27.08				•			88	•
		Medicare PPO Blue						\$143.00	\$41.84							88	•
	Commonwealth Care Alliance	Commonwealth Care Connection	•					\$15.12	\$15.12			•				79	•
	Commonwealth Care Alliance, Inc.	Senior Care Options Program					•	\$29.52	\$29.52			•				79	•
	Tufts Health Plan	Medicare Preferred HMO Value	•					\$32.00	-								i
		Medicare Preferred HMO Prime	•					\$50.00	-								i
		Medicare Preferred HMO Value Rx	•					\$52.00	\$19.55	•			•			96	•
		Medicare Preferred HMO Value Rx Plus	•					\$67.00	\$35.37	•			•	•		96	•
		Medicare Preferred HMO Prime Rx	•					\$70.00	\$19.55	•			•			96	•
		Medicare Preferred HMO Prime Rx Plus	•					\$85.00	\$35.37	•			•	•		96	•
		Medicare Preferred PPO		•				\$101.00	-								ĺ
		Medicare Preferred PPO Rx		•				\$121.00	\$19.55	•			•			96	•
		Medicare Preferred PPO Rx Plus		•				\$136.00	\$35.37	•			•	•		96	•
	United Health Group	Evercare Mass SCO					•	\$14.16	\$14.16	•			•			97	•
	United Healthcare Insurance Company	Evercare Plan IP		•				\$28.42	\$28.42	•						97	•
		Evercare Plan DP						\$30.27	\$30.27							97	•
		Erickson Advantage No Rx					•	\$90.00	-							_	
		Erickson Advantage					•	\$132.00	\$41.66							97	•

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		Description								Cost				Cove	erage		Convenience
			M		ype of Advantage	Plan				D	rug Deduct	ible		Coverage	Additional Offered in verage Gap		
County	Organization Name	Plan Name	нмо	Local PPO	Regional PPO	Private Fee-for- Service		Beneficiary Total Premium* (Including Drug Premium)	Beneficiary Drug Premium*	Zero	Reduced	Standard (\$250)	Includes Tiered Copay- ments for Drugs	Generics Only	Generics and Brands	Number of Top 100 Drugs on Formulary	Mail Order Offered
	Blue Cross & Blue Shield-							,								Ť	
SUFFOLK	Massachusetts	Medicare HMO Blue	•					\$92.00	-								
		Medicare HMO Blue						\$120.00	\$27.30	•						88	•
		Medicare HMO Blue						\$134.00	\$41.75							88	
	Blue Cross And Blue Shield Of Massachusetts, Inc.	Medicare PPO Blue						<b>***</b> *********************************									
	Massachuseπs, Inc.	Medicare PPO Blue		•				\$111.00	-								
		Medicare PPO Blue		•				\$138.00	\$27.31	•			•			88	•
		Medicare PPO Blue		•				\$153.00	\$41.75	•				•		88	•
	Commonwealth Care Alliance	Commonwealth Care Connection	•					\$15.12	\$15.12			•				79	•
	Commonwealth Care Alliance, Inc.	Senior Care Options Program					•	\$29.52	\$29.52			•				79	•
	Harvard Pilgrim Health Care	First Seniority	•					\$22.18	\$22.18	•			•			100	•
		First Seniority MA Only	•					\$96.00	-								
		First Seniority	•					\$121.00	\$22.18			•	•			100	•
	Senior Whole Health	Senior Whole Health					•	\$17.33	\$17.33			•				80	•
	Tufts Health Plan	Medicare Preferred HMO Value	•					\$49.00	-								
		Medicare Preferred HMO Value Rx	•					\$69.00	\$19.55	•			•			96	•
		Medicare Preferred HMO Value Rx Plus	•					\$84.00	\$35.37	•			•	•		96	•
		Medicare Preferred HMO Prime	•					\$87.00	-								
		Medicare Preferred PPO		•				\$101.00	-								
		Medicare Preferred HMO Prime Rx	•					\$107.00	\$19.55	•			•			96	•
		Medicare Preferred PPO Rx		•				\$121.00	\$19.55	•			•			96	•
		Medicare Preferred HMO Prime Rx Plus	•					\$122.00	\$35.37	•			•	•		96	•
		Medicare Preferred PPO Rx Plus		•				\$136.00	\$35.37	•			•	•		96	•
	United Health Group	Evercare Mass SCO					•	\$14.16	\$14.16	•			•			97	•
	United Healthcare Insurance Company	Evercare Plan IP		•				\$28.42	\$28.42	•			•			97	•
		Evercare Plan DP						\$30.27	\$30.27							97	

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		Description									Cost				Cov	erage		Convenience
			М		ype of Advantage	Plan					С	rug Deduct	ible		Coverage	Additional Offered in verage Gap		
County	Organization Name	Plan Name	нмо	Local PPO	Regional PPO	Private Fee-for- Service			Beneficiary Total Premium* (Including Drug Premium)	Beneficiary Drug Premium*	Zero	Reduced	Standard (\$250)	Includes Tiered Copay- ments for Drugs	Generics Only	Generics and Brands	Number of Top 100 Drugs on Formulary	Mail Order Offered
WORCESTER	Blue Cross & Blue Shield- Massachusetts	Medicare HMO Blue							\$98.00	-								
		Medicare HMO Blue							\$126.00	\$27.42	•						88	
		Medicare HMO Blue	•						\$140.00	\$41.76	•			•			88	•
	Blue Cross And Blue Shield Of Massachusetts, Inc.	Medicare PPO Blue							\$113.00	-								
		Medicare PPO Blue							\$141.00	\$27.41	•						88	•
	Faller Organist Health Blan	Medicare PPO Blue							\$155.00	\$41.76	•			•			88	•
	Fallon Community Health Plan	Fallon Senior Plan Saver	•						\$0.00	-							07	
		Fallon Senior Plan Value	•				-	1	\$29.00	\$28.77			•	•			97	•
		Fallon Senior Plan Saver Basic Rx	•				-	1	\$30.00	\$30.00			•	•			97	•
		Fallon Senior Plan Standard	•						\$40.00	\$47.00							07	
		Fallon Senior Plan Saver Enhanced Rx	•	1	<u> </u>				\$47.00		•			•			97	•
		Fallon Senior Plan Plus Fallon Senior Plan Standard Basic Rx	•	1	<u> </u>				\$70.00 \$71.00	- \$31.24			•				97	
		Fallon Senior Plan Standard Basic RX	·		<b> </b>			<del>                                     </del>	\$71.00	φ31.24		-	•	•		-	97	<u> </u>
		Fallon Senior Plan Standard Enhanced Rx							\$87.00	\$46.82							97	
		Fallon Senior Plan Plus Basic Rx	•						\$101.00	\$30.99	•			<del>- :</del>			97	·
		Fallon Senior Plan Plus Enhanced Rx	•	1					\$117.00	\$46.41	•			•			97	•
		Fallon Senior Plan Preferred							\$135.00	-				-			Ü.	
		Fallon Senior Plan Preferred Basic Rx		•					\$166.00	\$30.99			•	•			97	•
		Fallon Senior Plan Preferred Enhanced Rx		•					\$182.00	\$46.41	•			•			97	•
	Tufts Health Plan	Medicare Preferred HMO Value	•						\$47.00	-								
		Medicare Preferred HMO Value Rx	•						\$67.00	\$19.55	•			•			96	•
		Medicare Preferred HMO Value Rx Plus	•						\$82.00	\$35.37	•			•	•		96	•
		Medicare Preferred HMO Prime Medicare Preferred PPO	•				-		\$85.00 \$91.00	-								
		Medicare Preferred PPO Medicare Preferred HMO Prime Rx		•	<b> </b>	<del>                                     </del>	<u> </u>	<del>                                     </del>	\$91.00 \$105.00	- \$19.55		<del>                                     </del>		•	<del>                                     </del>	<del>                                     </del>	96	
	+	Medicare Preferred PPO Rx	•	•	-	-	1	-	\$105.00	\$19.55	<u> </u>	<del>                                     </del>			-	-	96	<del>- :</del>
	+	Medicare Preferred HMO Prime Rx Plus		<del>-</del>	1		<b>-</b>		\$120.00	\$35.37	•			•			96	<del>- : -</del>
		Medicare Preferred PPO Rx Plus	Ť	•	<b> </b>	<del>                                     </del>	<del>                                     </del>	<del>                                     </del>	\$126.00	\$35.37	•	<b>†</b>		-	<u> </u>	<del>                                     </del>	96	<del>- :-</del>
	United Health Group	Evercare Mass SCO			1	1	1	•	\$14.16	\$14.16	•	1		•	-	1	97	•
	- Trouble Group			1	1		1		<b>ψ</b>	ŲJ				İ -			,	
	United Healthcare Insurance Company	Evercare Plan IP							\$28.42	\$28.42	•			•			97	•
		Evercare Plan DP							\$30.27	\$30.27							97	•